

APPLICATION DATA SHEET

APPLICATION INFORMATION

Application Type::	Utility
Title Line One::	PAIN BALM
Attorney Docket Number::	30310-US-548
Request for Early Publication?::	Yes
Request for Non-Publication?::	No
Suggested Drawing Figure::	
Total Drawing Sheets::	0
Small Entity?::	Yes
Secrecy Order in Parent Appl.?::	No

APPLICANT INFORMATION

Applicant Authority Type::	Inventor
Primary Citizenship Country::	US
Status::	Full Capacity
Inventor One Given Name::	Jerry
Middle Name::	V.
Family Name::	Mayeux
City of Residence::	Deming
State or Province of Residence::	New Mexico
Country of Residence::	US
Street of Mailing Address::	HC 66, Box 74
City of Mailing Address::	Deming

State or Province of

Mailing Address:: New Mexico

Country of Mailing Address:: US

Postal or Zip Code of Mailing

Address:: 88030

CORRESPONDENCE INFORMATION

Correspondence Customer

No.:: 005179

Phone Number:: (505) 998-1500

Fax Number:: (505) 243-2542

E-Mail Address:: DPeacock@peacocklaw.com

REPRESENTATIVE INFORMATION

Representative Customer

Number:: 005179

DOMESTIC PRIORITY INFORMATION

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This Application	An application Claiming the Benefit Under 35 USC 119(e)	60/453,548	03/10/2003